

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: _____		2 Serial/Patent # <u>10/529,049</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
Overpayment		Credit Deposit A/C #:									
Duplicate Payment		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr><td>2</td><td>3</td><td>--</td><td>1</td><td>9</td><td>2</td><td>5</td></tr> </table>			2	3	--	1	9	2	5
2	3	--	1	9	2	5					
No Fee Due (Explanation):											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: _____		TITLE: _____									
SIGNATURE: _____		PHONE: _____									
OFFICE: _____		<small>Repln. Ref: 08/12/2005 BCAMPBEL 0015562000 DAH:231925 Name/Number:10529049</small>									
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____		DATE: _____									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: